

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO. 30-025-34400
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. #23303
7. Lease Name or Unit Agreement Name Carlisle State Com
8. Well No. 1-Y
9. Pool name or Wildcat Townsend Morrow
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR 3998' KB 4015'

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator Ocean Energy, Inc.
3. Address of Operator 410 17th Street, Suite 1400, Denver, Colorado 80202	4. Well Location Unit Letter <u>K</u> <u>1721</u> Feet From The <u>South</u> Line and <u>1909</u> Feet From The <u>West</u> Line Section <u>10</u> Township <u>16S</u> Range <u>35E</u> NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR 3998' KB 4015'	

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>
	OTHER: <input type="checkbox"/>

12 Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent date, including estimated date of starting any proposed work).  
SEE RULE 1103

5/24/98 Surface Casing: 13-3/8" 48#, H-40 @ 489'. Cemented to surface with 450 sx class "C" + 2% CACL. Placed Centralizers 5' above shoe on top of joints 2,5,8 & 10 (5 total). WOC 8 hrs.

6/5/98 Intermediate Casing: 9-5/8" 40# N-80 @ 4750'. Cemented to surface with 1600 sx Interfill "C" & tail in with 200 sx "C". WOC 6 hrs.

7/9/98 Production Casing: 5-1/2" 17# N-80 & S-95 @ 12370'. Cemented with 400 sx Interfill "H" + 1/4#/sx Flocele & tailed with 325 sx "H" + .4% CFR-3 & .5% Halad-304 & 1#/sx salt & 5#/sx Gilsontite. TOC @ 8160'. Centralizers placed @ 5' above shoe and on joint #'s 2,4,6,8, 10,12,14,16,18,20,22,24,26 & 28 (15 total). Float Collar @ 12323'.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Scott M. Webb TITLE Regulatory Coordinator DATE 08/12/98  
TYPE OR PRINT NAME Scott M. Webb TELEPHONE NO. (303) 573-4721

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY CHIEF TITLE CHIEF DATE SEP 10 1998  
CONDITIONS OF APPROVAL, IF ANY: